HOPE HEALTH HEALING





Patrick Phelan, Sinnissippi Centers President/CEO is marking his 5th year at the agency

Looking Back Half a Decade

It has been my great pleasure to serve as the Chief Executive Officer of Sinnissippi Centers over the past half decade. Although it has been a turbulent time for community behavioral health, this period has also brought exciting changes to Sinnissippi.
 During the past five years, Illinois was without a budget for two years; the longest stalemate in state and national history. This led to huge losses in grant funds for Sinnissippi and payment delays that, at mossible, and made it through these challenging years.
 This past fiscal year has been a period of even more dramatic change in community behavioral health. Sinnissippi Centers made the transition to managed Medicaid, we have adapted to significant ule changes from our funders, been forced to revamp our crisis response system, and started on a path fulles. These changes present some opportunities, but are fraught with difficulties as well.
 Despite persistent and varied challenges, we have accomplished a lot during the last five years. Sinnissippi Centers had the opportunity to be involved in the development of groundbreaking partnerships with law enforcement and primary care to address substance use and mental illness in our communities (Safe Passages and copened the first Recovery Home in our area.
 Sinnissippi Centers worked with community partners to develop a Pediatric Development Center, Forissa, unheard of in a rural area. We have greatly expanded our presence in area schools, and or reare model for yourb and familiae continues to pay of the one or theore or the reagent of the address due to pay of the one or the or evence of the oregon the data.

Florissa, unheard of in a rural area. We have greatly expanded our presence in area schools, and our system of care model for youth and families continues to pave the way for others across the state and nation. Additionally, Sinnissippi embarked on a transformational journey working toward being truly trauma-informed in all that we do. We continue to enhance our position as a leader in behavioral healthcare



Despite fiscal challenges, Sinnissippi Centers has been able to enhance our crisis response services to the community, embarked on a journey, now almost complete, to a new electronic health record, and engaged in projects that opened a new office in Oregon and expanded the existing facility in Dixon. We have successfully made changes that have enhanced recruiting and retention of existing staff. Our Center of Excellence, moving interns through long-term employment, is a model for recruiting that will be replicated at many other organizations. Although it has been far from easy, the last five years have been the most rewarding and enjoyable professional experience of my life. I look forward to both the challenges and the rewards that the next five years will bring. Thank you to the Boards of Directors, our Sinnissippi employees, our consumers and the community for allowing me to serve as your CEO.

The Realization of a Long Held Dream a Home for Recovery

Providing behavioral healthcare services in a rural area is often a challenge. There are many of the same needs as urban areas, but often fewer resources to meet them. However, in 2018, the right mix of partnerships and resources converged and Sinnissippi Centers was able to realize a 15+ year dream: Opening a recovery home for individuals suffering from a substance use disorder. Renovations of the building began in March and residents began arriving in May.

The Recovery Home is located in Dixon and provides room for 10 adult men who have come from all four counties we serve. By all measures, it has been a great success.

The Recovery Home provides a therapeutic environment to support men in their recovery. Individuals come to the home with some length of sobriety, and participate in a structured treatment program. They are motivated to get the help they need and are working to maintain their sobriety, obtain employment, learn additional life skills, and get out on their own in order to become more successful members of our community.

We talked with staff, residents, and community partners to get their perspectives (also see additional story, far right) on how the Recovery Home has helped. It's very telling that they all remarked on many of the same things: How the most basic needs in life that any of us can take for granted make such a huge difference, for those in recovery. Like living in a safe home, good nutrition, physical and mental wellness education, employment, and access to supportive staff and peer supports. In the short time it's been open we have already seen how much the

recovery home is impacting the lives of the residents. That's what it's all about. Recovery Home Manager Stephanie Englund observes, "It feels like a place where they can take a breath, take stock of their life, and figure out where they where they can take a breath, take stock of their me, and figure out where they want to go. The individuals in the recovery home are community members, neighbors, co-workers, and they all deserve dignity, respect, and support throughout this process," adds Englund. This all has been made possible through deepening of community partnerships, like the Sefe Deserved in the sefe Deserved in the sefe Deserved in the sefective in the

like the Safe Passages initiative in Lee County. Linda Wegner from Safe Passages says, "The new Recovery Home in Dixon is an important piece in the follow-up process. We now have a place to refer clients in our town. More than just a roof over their heads, clients can get on-site counseling, job training, and that all-important support and socialization from other men facing the same issues. Because substance use affects the family, this transitional living arrangement can help families become whole again. Healthy families make our area a better place. The new Recovery Home is a gift to our community!'



Sinnissippi staff members and volunteers helped in the remodeling and preparations of the Recovery Home



Sinnissippi Centers' Recovery Home

Focus On School Based Services

Mental health disorders are the most common health issues faced by schoolaged children. With the support from the Illínois Children's Healthcare Foundation, Sinnissippi and partner organizations expanded a system of care in 2010 for children's mental health services. Many area schools identified the need for school

based behavioral health counseling. Sinnissippi now has counselors in 20 area schools with plans to continue growing. Children receiving school based services are clients of



Sinnissippi Centers, but their treatment is provided primarily at school. Children who have access to school based counseling are ten times more likely to receive needed services which correlates with reduced discipline problems, higher graduation rates, and ultimately more positive life outcomes.

Behavioral Health Excellence

In August 2017, Sinnissippi Centers launched the Behavioral Health Rural Training Center of Excellence (COE). The goal of the COE is to create a talent pipeline for candidates who are interested in a career in a rural area and are seeking master's degrees with a clinical behavioral health focus. A full 6 year COE timeline provides students with internship training licensure attainment, and loan repayment. Within the first cohort of candidates, students from Western Illinois University and Northern Illinois University completed the internship training phase and accepted full-time employment with Sinnissippi upon receipt of their master's degrees. The second cohort began internship training in August of 2018 and recruitment has begun for the third year of COE candidates.

Changes to SASS System

In the summer of 2018 the state of Illinois began to enact changes to the crisis intervention system for those with a mental illness. SASS, the long-time crisis program for kids was eliminated. SASS stood for Screening Assessment and Support Services. In its place is the Mobile Crisis Response program that requires behavioral healthcare service providers to screen both youth and adults, but does not provide the intensity of follow up services SASS recipients used to receive. Additionally there were funding cuts attached to these services. It's a bit of a step back, but Sinnissippi remains committed to providing the best possible services under circumstances we face.

New Family Advocacy Center

In December 2017, Sinnissippi Centers joined a statewide network of unique community based providers. With funds from the Illinois Department of Children

and Family Services. Sinnissippi began providing services in Whiteside County as a Family Advocacy



Center (FAC). Priority goals are to provide supplemental support to parents involved with child welfare interventions. Participation is voluntary and services include parent education and linkage to needed services. Each FAC works collaboratively with "Be Strong Families" (formerly Strengthening Families Illinois) seeking to build resilience in families and improve child outcomes. Sinnissippi provides parent education individually and in group settings, and also provides a variety of other services through the FAC. The program has no cost for participants.

Gardenstock Art & Music Festival

The 10th Annual Gardenstock Art & Music Festival was another hit. Special

quest Melanie was one of the favorites at the event. An unknown artist in 1969, Melanie was one of a very few female solo acts who performed at Woodstock. There were around 1,500 in attendance at Gardenstock which featured 9 bands in all and 40 artists booths. The event is held yearly on the third Saturday



Jennifer Lubbs Photography

in August on the grounds of Distinctive Gardens. The proceeds raised benefits the Sinnissippi Centers Youth Garden Project.

Community Response to Crisis

A new collaborative effort by Sinnissippi Centers led to the formation in FY2018 of the Community Crisis Response Team, or CCRT. The team consists of mental health professionals who ommunity

respond to critical incidents in the communities in our four county service area. A critical incident is any event traumatic enough to overwhelm a person's

normal coping ability. Examples include a school shooting, a tornado, a suicide or homicide, the serious injury or death of a co-worker or student, or any other traumatic community event that attracts media attention.



Consumer Advisory Council

Sinnissippi Centers formed a Consumer Advisory Council in the fall of 2017. Clients

on the council are able

💥 Consumer Advisory Council

to advocate for positive change while at the same time they build connections within their communities. Called the Better Living Consumer Group, the council is a cross section of individuals who have lived experience with mental health and/or substance use disorders. Family members can also be a part of the council. The objectives of the council are to advocate for behavioral healthcare improvements, enhanced community resources, and legislative change; to educate others about behavioral health; to reduce stigma; to promote recovery; and to enhance community connections through volunteerism.

Dedicated to Dr. Don

Sinnissippi Centers was founded in 1966 as a result of federal legislation creating community behavioral health centers and as a résult of local efforts by

a group of dedicated individuals. Among them was Dr. Don Edwards of Dixon. Sadly we lost Dr. Don September 27, 2018. Dr. Don was one of the founders of the then Sinnissippi Mental Health Center, and served on our Board of Directors for many years. He was well



loved by a great many people in the Sauk Valley and will be sorely missed. We dedicate this issue of Sinnissippi Centers' annual report to his memory.



The butterfly is a symbol of recovery. The dramatic transformation from caterpillar to butterfly is like the transformation from disease to recovery

A Healing Process of Recovery and Rediscovery

We had the privilege to sit down and talk with some of the residents of Sinnissippi Centers' new Recovery home who were happy to share their experiences with substance use disorder and their journeys of recovery. Even for us, It was a very powerful experience hearing their stories of how this disease has devastated their lives, how they have picked up the pieces, how they are changing now, and how they are hopeful for the future. A common theme that came up as we spoke with the residents was that they started using substances at an early age, which later led to their addiction, as it developed over time. Another common theme that we talked about was "unmanageability". The life of an addict becomes unmanageable in an ordinary sense. One of the steps to recovery is admitting this "unmanageability"

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of recovery. The dramatic ransformation from catepillar to the transformation from disease to recovery is no thought process, addiction has you so stuck in your ways, you don't get motivated by the negative consequences, " said one resident. Another said, "If you are not an addict, how can you know, it's something that is hard to explain, it's hard to understand. If we could just stop it, we would and we wouldn't be here." A third resident told us, "Addiction screws up the wiring and the thought processes in your brain. It's not normal." They also said, "Part of the disease is the sense of feeling alone and no one understanding, which itself is a huge trigger to using." Maybe the best description we heard is this, it is difficult to try to explain to someone how and when someone decides to seek treatment. It's a process, and like the person just make that decision early in their disease, but for most it's a much longer and more difficult process, and like the person therewise, each process is unique. But you do reach a point that may be described as being 'sick and tired of being sick and tired' and that motivates you to take one of many next steps on your own personal road of recovery." All the residents we talked to spoke of rediscovering who they really were, that their disease was in control before, that it wasn't their "real" selves. They all have hope that they can regain at least some of the many things they have lost, especially relationships that were damaged and they hope to reclaim those things in life that give them purpose and joy. One resident remarked that a place like the again and residents can work on resisting the triggers to relapse. Relapse happens, it's not a failure but a feature of the disease. The Recovery Home offers a place for individuals to learn and work on coping and recovery skills, to reclaim their lives, while having a support system to do it.



Sinnissippi Centers, Inc.

Clients by County of Residence



Total Client Served 5,365

Age of Our Clients by Percent



Crisis Evaluations 1,810 Crisis evaluations were performed in fiscal 2018 (unduplicated) A 5% increase

FY 2018 Expenses

76.9% Personnel & Benefits
7.2% Rent/Leases
5.8% Other
3.3% Consumables
3.3% Occupancy
2.5% Transportation
1.0% Depreciation



Fiscal Year 2018 at a glance



Client Satisfaction Survey Results



Educational Attainment of Our Staff



55 Master's Degrees 39 Bachelor's Degrees

2 Licensed Practical Nurses (LPN)

2 Advanced Practice Nurses (APN)

5.2% SUPR

2 Psychiatrists (MD)

FY 2018 Revenue 34.5% Medicaid/MRO

13.3% Client Payments
12.0% Dept. Mental Health
8.6% DCHP & Other State Grants
7.5% Four county support
7.4% DHFS
5.9% DCFS
5.8% Other

Licensure & Accreditation



The Joint Commission Illinois Division of Substance Use Prevention and Recovery Illinois Division of Mental Health Illinois Department of Children and Family Services

www.sinnissippi.org Sinnissippi Centers is funded, in part, by the Illinois Department of Human Services

